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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 740928-140
CERTIFICATE OF MAILING OR TRANSMISSION (37 CFR 1.8(a)) I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-4300, on June 30, 2006. <i>Michelle Duvall</i> Signature: <u>Michelle Duvall</u>		
In re Application of Walter FRAZIER Application Number 10/752,094 Filed 01/07/2004 For IN-LINE ROLLER SKATE Group Art Unit 3618 Examiner Hau Van PHAN		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate entity fee are as follows (check time period desired):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \$ _____ <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$ <u>450.00</u> <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) \$ _____ <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \$ _____ <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$ _____		
<input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380 (740928-140)</u> . I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.		
<i>Corinne R. Gorski</i> Signature		June 30, 2006 Date
Corinne R. Gorski, Reg. No. 34,339 Typed or printed name		202-585-8000 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted. 01 FC.1252 450.00 DA 07/07/2006 MDTHAG 00000036 102300 0752094		

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